IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Per EGNELÖV et al

Title:

DEVICE FOR VISUALLY INDICATING A BLOOD PRESSURE

Appl. No.:

Unassigned

Filing Date:

January 14, 2004

Examiner:

Unknown

Art Unit:

Unknown

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

> Per EGNELÖV Fredrik PREINITZ James FUCHS Dan ÅKERFELDT Lars TENERZ

Applicant claims small entity status under 37 CFR 1.27. [X]

Enclosed are:

- Specification, Claim(s), and Abstract (17 pages). [X]
- Informal drawings (9 sheets, Figures 1-10). [X]
- [X]Information Disclosure Statement.
- [X]Form PTO/SB/08.
- [X] Application Data Sheet (37 CFR 1.76).



The filing fee is calculated below:

	Claims		Included		Extra		Rate		Fee
	as Filed		in		Claims				Totals
		-	Basic Fee						
Basic Fee							\$770.00	=	\$770.00
Total	20	-	20	=	0	X	\$18.00	=	\$0.00
Claims:									
Independents	3	-	3	=	0	X	\$86.00	=	\$0.00
:									
If any Multiple Dependent Claim(s) present: + \$290.00								=	\$0.00
Surcharge und	ler 37 CFR	1.16	(e) for late	filiı	ng of	+	\$130.00		\$130.00
Executed Declaration and late payment of filing fee								=	
							SUBTOTAL:	=	\$900.00
[X]		Sm	all Entity F	rees	Apply (s	subtr	act ½ of above):	=	\$450.00
					T	OTA	L FILING FEE:	=	\$450.00

- [] A check in the amount of \$0.00 to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date January 14, 2004

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Respectfully submitted,

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